

DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

	ANGIOGENESIS-INHIBITORY TRIPEPTIDES, COMPOSITIONS AND THEIR METHODS OF USE			
As the below named inventor(s), I/we declare that:				
This declaration is	directed to:			
	☐ The attached application, or			
	Application No. <u>10/074,389</u> , filed on <u>February 12, 2002</u> ,			
	as amended on (if applicable);			
I/we believe that I/ which a patent is so	we am/are the original and first inventor(s) of the subject matter which is claimed bught;	and for		
I/we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;				
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part application, if applicable; and				
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.				
		and may		
	lity of the application or any patent issuing thereon.	and may		
jeopardize the valid	lity of the application or any patent issuing thereon.	and may		
jeopardize the valid	VENTOR(S)	and may		
FULL NAME OF IN Inventor one: Signature:	VENTOR(S) MARK A. SCIALDONE	and may		
FULL NAME OF IN Inventor one: Signature:	VENTOR(S) MARK A. SCIAL DOLE Citizen of UNITED STATES			
FULL NAME OF IN Inventor one: Signature: Inventor two: Signature:	VENTOR(S) MARK A. SCIAL DOLE Citizen of: UNITED STATES SHAKER AHMED MOUSA			
FULL NAME OF IN Inventor one: Signature: Inventor two: Signature:	VENTOR(S) MARK A. SCIAL DOLE Citizen of UNITED STATES SHAKER AHMED MOUSA Citizen of UNITED KINGDOM			
FULL NAME OF IN Inventor one: Signature: Inventor two: Signature: Inventor three:	WENTOR(S) MARK A. SCIAL DOLE Citizen of: UNITED STATES SHAKER AHMED MOUSA Citizen of UNITED KINGDOM STEVEN W. SHUEY	and may		
FULL NAME OF IN Inventor one: Signature: Inventor two: Signature: Inventor three: Signature:	WENTOR(S) MARK A. SCIAL DOLE Citizen of: UNITED STATES SHAKER AHMED MOUSA Citizen of UNITED KINGDOM STEVEN W. SHUEY	and Illay		

Burden Hour Statement. This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief information Officer. U.S. Patent and Trademark Office. Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents. Washington, DC 20231.

PTO/SB/01A (10-01)

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DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

Title of Invention	ANGIC OF US		Y TRIPEPTIDES, COMPOSITIONS AND THEIR METHODS	
As the below named inventor(s), I/we declare that:				
			"MLL	
This declaration is	directed	to:		
	☐ The attached application, or			
	Application No. 10/074,389, filed on February 12, 2002,			
		as amended on	(if applicable);	
I/we believe that I/which a patent is so	/we am/a ought;	are the original and fir	st inventor(s) of the subject matter which is claimed and for	
		nderstand the contents and specifically referred	s of the above-identified application, including the claims, as to above;	
to me/us to be mat available between	erial to p the filing	patentability as defined	ed States Patent and Trademark Office all information known in 37 CFR 1.56, including material information which became cation and the National or PCT International filing date of the	
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.				
FULL NAME OF IN	IVENTO	R(S)		
Inventor one:	MARK A.	. SCIALDONE		
Signature:			Citizen of: UNITED STATES	
Inventor two:	SHAKER	R AHMED MOUSA		
Signature:	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Zu-	Citizen of: UNITED KNOOM States	
Inventor three:	STEVEN	W. SHUEY		
Signature:			Citizen of: UNITED STATES	
Inventor four:				
Signature.			Citizen of:	
☐ Additional inve	entors are	being named on a	dditional form(s) attached hereto	

Burden Hour Statement. This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the PTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief information Officer. U.S. Patent and Trademark Office. Washington. DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO. Assistant Commissioner for Patents. Washington. DC 20231.



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PTO/SB/81 (02-01)

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Application Number 10/074,389 Filing Date First Named Inventor ANGIOGENESIS-INHIBITORY TRIPEPTIDES, Title COMPOSITIONS AND THEIR METHODS OF USE **Group Art Unit Examiner Name** Attorney Docket Number | CL1723 US NA

I hereby appoint:				
Practitioners at Customer Number	23906		^23906*	
OR		l	PATENT TRADEMARK OFFICE	
☐ Practitioner(s) named below:				
Name		Registration N	umber	
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I am the:	I am the:			
☐ Applicant/Inventor				
Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3 73(b) is enclosed. (Form PTO/SB/96).				
SIGNATURE of Applicant or Assignee of Record				
Name MARK A. SCIALDONE				
Signature () ()				
Date 5 23 0 2				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*				uired.
Total of forms are submitted	<u> </u>	-		

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/074,389
Filing Date	February 12, 2002
First Named Inventor	Mark A. Scialdone
Title	ANGIOGENESIS-INHIBITORY TRIPEPTIDES, COMPOSITIONS AND THEIR METHODS OF USE
Group Art Unit	1643
Examiner Name	
Attorney Docket Number	CL1723 US NA

I hereby appoint: ☑ Practitioners at Customer Number OR ☐ Practitioner(s) named below *23906 Patent trademark office			
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I am the:			
Applicant/Inventor			
Assignee of record of the entire interest. See 37 CFR 3.71. Certificate under 37 CFR 3 73(b) is enclosed. (Form PTO/SB/96).			
SIGNATURE of Applicant or Assignee of Record			
Name STEVEN W. SHUEY			
Signature Stry W. Stry			
Date 5/16/62			
Date 5/11/62 NOTE. Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*			

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TRACE BY Under the Paperwork Reduction Act of 1995 no persons	Application Number	10/074,389
	Filing Date	February 12, 2002
POWER OF ATTORNEY OR	First Named Inventor	Mark A. Scialdone
AUTHORIZATION OF AGENT	Title	ANGIOGENESIS-INHIBITORY TRIPEPTIDES, COMPOSITIONS AND THEIR METHODS OF USE
, to monte, the or , to Em	Group Art Unit	1643
	Examiner Name	
1		

hereby appo	int ers at Customer Number	23906		*23906*
OR			-	PATENT TRADEMARK OFFICE
☐ Practitione	er(s) named below			
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Assignee of record of the entire interest. See 37 CFR 3 71. Certificate under 37 CFR 3 73(b) is enclosed (Form PTO/SB/96)				
SIGNATURE of Applicant or Assignee of Record				
Name	SHAKER A. MOUSA			
Signature	-36-			
Date	06102	102		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				
•Total of forms are submitted				